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RECORDATION DATE: 12/28/2004

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BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).
DOCKET NUMBER: 105032-991220

ASSIGNOR:

KLAPPROTH, HOLGER

DOC DATE: 08/16/2004

ASSIGNEE:

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HANS-BUNTE-STRASSE 19
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SERIAL NUMBER: 09889935

FILING DATE: 12/05/2001

PATENT NUMBER:

ISSUE DATE:

TITLE: IMMOBILIZATION OF MOLECULES ON SURFACES VIA POLYMER BRUSHES

01-18-05 09:59am From-DLAPRG US LLP

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RECORDATION DATE: 12/28/2004

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BRIEF: COPY OF CERTIFICATE OF APPOINTMENT OF MR. METZGER; ENGLISH
TRANSLATION; VERIFICATION OF TRANSLATION
DOCKET NUMBER: 105032991220

ASSIGNOR:
BIOCHIP TECHNOLOGIES GMBH

DOC DATE: 08/15/2004

ASSIGNEE:
HOLGER KLAPPROTH
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SERIAL NUMBER: 09889935

FILING DATE: 12/05/2001

PATENT NUMBER:

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TITLE: IMMOBILIZATION OF MOLECULES ON SURFACES VIA POLYMER BRUSHES

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Tab settings:		Atty Docket: 106032-881220			
To the Honorable Commissioner of Patents and Trademarks: Please Record the attached original documents or copy thereof.					
1. Name of conveying party(ies): BioChip Technologies GmbH		2. Name and address of receiving party(ies) Name: <u>Holger KLAPPROTH</u> Internal Address: _____ Street Address: <u>Kohlerstrasse 12</u> City: <u>Freiburg</u> State/Country: <u>GERMANY</u> Zip: <u>79108</u> Additional Name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Additional name of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other <u>Copy of Certificate of Appointment of Mr. Metzger, English Translation; Verification of Translation</u> Execution Date: <u>August 15, 2004</u>			
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application by the first named inventor is: _____ A. Patent Application No (s) <u>09/889,935</u> B. Patent No.(s) Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning this document should be mailed: <u>*35928*</u> <u>35928</u> PATENT TRADEMARK OFFICE Name: <u>GRAY CARLY WARE & FREDENRICH LLP</u> Address: <u>1625 Massachusetts Avenue, N.W.</u> <u>Suite 300</u> City: <u>Washington</u> State: <u>D.C.</u> Zip: <u>20036</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 3.41) \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>07-1896</u> (Attach duplicate copy of this page if paying by deposit account)			
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9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. <u>Dean H. Nakamura</u> <u>December 28, 2004</u> Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: <u>8</u> Mail documents to be recorded with required cover sheet information to: Commissioner of Patents & Trademarks, Box Assignments, Alexandria, VA 22313-1460					

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